

FORM #585

MEDICAL GRIEVANCE

(NO ANSWER)

FACILITY: D.C.CDATE SUBMITTED: 10/3/02INMATE'S NAME: James RileySBI#: 169216HOUSING UNIT: SHU Bldg. 18

CASE #: _____

SECTION #1DATE & TIME OF MEDICAL INCIDENT: August 2002 And continuing

TYPE OF MEDICAL PROBLEM:

Several weeks ago I was seen by The doctor for an unknown rectum dysfunction which may have resulted from weight lifting. The doctor prescribed medication without conducting any type of physical examination to determine exactly what the injury is and then properly treat it. The prescribed medication is not alleviating the painful swelling of my rectum that occur each time I defecate. I think surgery is necessary to correct the problem.

GRIEVANT'S SIGNATURE: James RileyDATE: 10/3/02

ACTION REQUESTED BY GRIEVANT: Conduct Adequate examination to diagnose the injury rectum And schedule me for surgery if needed. And provide immediate treatment to stop painful swelling and unnecessary suffering.

DATE RECEIVED BY MEDICAL UNIT: _____

NOTE: EMERGENCY MEDICAL CONDITIONS WILL TAKE PRIORITY. OTHERWISE, MEDICAL GRIEVANCES WILL BE ADDRESSED AT THE WEEKLY MEDICAL COMMITTEE MEETING.

Ex. A-1

FORM #585

MEDICAL GRIEVANCENo AnswerFACILITY: D.C.CDATE SUBMITTED: 6/15/03INMATE'S NAME: James RileySBI#: 169916HOUSING UNIT: SHU, Bldg. 18
CL6

CASE #: _____

SECTION #1DATE & TIME OF MEDICAL INCIDENT: In reference to Grievance
Filed on 10/3/02

TYPE OF MEDICAL PROBLEM:

I did not receive A response to my grievance Filed on 10/3/02 regarding A very painful rectum dysfunction Stemming From An injury sustained during A weight lifting competition in 1998. A doctor seen me for the problem Several months ago and prescribed medication without conducting A physical examination to diagnose the problem and extent of the injury. I am still suffering painful swelling of my rectum every time I defecate. The swelling last for long periods of time which prevent me From participating in any type of daily activities.

GRIEVANT'S SIGNATURE: James Riley DATE: July 15, 2003ACTION REQUESTED BY GRIEVANT: Answer this Grievance immediately
and provide Adequate treatment to prevent prolong
unnecessary pain and suffering.

DATE RECEIVED BY MEDICAL UNIT: _____

NOTE: EMERGENCY MEDICAL CONDITIONS WILL TAKE PRIORITY. OTHERWISE, MEDICAL
GRIEVANCES WILL BE ADDRESSED AT THE WEEKLY MEDICAL COMMITTEE MEETING.

Ex. A-2

(No Answer)

From: James W. Riley
Dela. Corr. Center
MHU Building 23
C-Tier, Cell 4-6

To: Warden Thomas Carroll
Dela. Corr. Center
Main Compound
Smyrna, Delaware 19977

October 21, 2003

Re: Denial of medical Treatment

Dear Warden Carroll,

I initially filed a sick call slip in 2002 while housed on death row in Building 18 of the SHU requesting treatment for a rectum dysfunction. The doctor did not properly treat me for this problem and I am left to suffer excruciating pain for hours each time after having a bowel movement. This medical condition affects all my daily activities. While I'm still segregated surgery should be recommended to correct the problem so it won't interfere with my daily activities once I'm moved out to the general population. I filed two medical grievances, one in 2002 and another in 2003 but they both were ignored. Please contact the medical department and direct them to take care my medical problem immediately.

Thank You!

James Riley

Ex. A-3

DCC Delaware Correctional Center
 Smyrna Landing Road
 SMYRNA DE, 19977
 Phone No. 302-653-9261

Date: 08/29/2005

GRIEVANCE REPORT

OFFENDER GRIEVANCE INFORMATION

Offender Name : RILEY, JAMES W	SBI# : 00169716	Institution : DCC
Grievance # : 12309	Grievance Date : 03/02/2005	Category : Individual
Status : Withdrawn	Resolution Status :	Resol. Date :
Grievance Type: Health Issue (Medical)	Incident Date : 03/02/2005	Incident Time :
IGC : Merson, Lise M	Housing Location : Bldg 21, Lower, Tier B, Cell 5, Bottom	

OFFENDER GRIEVANCE DETAILS

Description of Complaint: Several months ago on two different occasions two doctors approved for me to have special footwear for medical reasons. Due to the extent of my ankle fracture I was approved to have high-top boots and sneakers. I have the original doctor's order from 1995 if that will assist in resolving the matter. Also since I have to exercise in the sneakers which cause them to wear down on the heels placing significant strain and pain on the outside of my right ankle where the surgical pins are inserted and where the joint no longer bend in that direction - I need approval a memo from medical to permit me to at least have two pairs of sneakers, a pair to walk in and a pair to exercise in. Its mandatory that I constantly exercise my ankle or else it stiffen up and walking become more difficult.

Remedy Requested : Be provided with the boots and sneakers approved by medical and security. I previously received this foot wear. A re-order should not be a problem with security.

INDIVIDUALS INVOLVED

Type	SBI #	Name

ADDITIONAL GRIEVANCE INFORMATION

Medical Grievance : YES	Date Received by Medical Unit : 03/15/2005
Investigation Sent : 03/15/2005	Investigation Sent To : Munson, Amy
Grievance Amount :	

DCC Delaware Correctional Center
Smyrna Landing Road
SMYRNA DE, 19977
Phone No. 302-653-9261

Date: 08/29/2005

INFORMAL RESOLUTION

OFFENDER GRIEVANCE INFORMATION

Offender Name : RILEY, JAMES W	SBI# : 00169716	Institution : DCC
Grievance # : 12309	Grievance Date : 03/02/2005	Category : Individual
Status : Withdrawn	Resolution Status:	Inmate Status :
Grievance Type: Health Issue (Medical)	Incident Date : 03/02/2005	Incident Time :
IGC : Merson, Lise M	Housing Location :Bldg 21, Lower, Tier B, Cell 5, Bottom	

INFORMAL RESOLUTION

Investigator Name : Munson, Amy Date of Report 03/15/2005
Investigation Report :
Reason for Referring:

Investigator Name : Wolken, Gina Date of Report 03/16/2005
Investigation Report : Spoke with Medical director - sneaker size 8.5 to be ordered
Refused to sign
Reason for Referring:

Offender's Signature: _____

Date : _____

Witness (Officer) : _____

DCC Delaware Correctional Center
Smyrna Landing Road
SMYRNA DE, 19977
Phone No. 302-653-9261

Date: 08/29/2005

GRIEVANCE INFORMATION - IGC**OFFENDER GRIEVANCE INFORMATION**

Offender Name : RILEY, JAMES W	SBI# : 00169716	Institution : DCC
Grievance # : 12309	Grievance Date : 03/02/2005	Category : Individual
Status : Withdrawn	Resolution Status :	Inmate Status :
Grievance Type: Health Issue (Medical)	Incident Date : 03/02/2005	Incident Time :
IGC : Merson, Lise M	Housing Location : Bldg 21, Lower, Tier B, Cell 5, Bottom	

IGC

Medical Provider:

Date Assigned

Comments:

☒ Forward to MGC☐ Warden Notified☐ Forward to RGC

Date Forwarded to RGC/MGC : 06/17/2005

☒ Offender Signature Captured

Date Offender Signed : 08/29/2005

Smyrna Landing Road

SMYRNA DE, 19977

Phone No. 302-653-9261

GRIEVANCE INFORMATION - MGC**OFFENDER GRIEVANCE INFORMATION**

Offender Name :	RILEY, JAMES W	SBI# :	00169716	Institution :	DCC
Grievance # :	12309	Grievance Date :	03/02/2005	Category :	Individual
Status :	Withdrawn	Resolution Status:		Inmate Status :	
Grievance Type:	Health Issue (Medical)	Incident Date :	03/02/2005	Incident Time :	
IGC :	Merson, Lise M	Housing Location :	Bldg 21, Lower, Tier B, Cell 5, Bottom		

MGC

Date Received : 06/17/2005

Date of Recommendation: 06/17/2005

GRIEVANCE COMMITTEE MEMBERS

Person Type	SBI #	Name	Vote
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VOTE COUNT

Uphold :

Deny :

Abstain :

TIE BREAKER

Person Type	SBI #	Name	Vote
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RECOMMENDATION

FORM #584

GRIEVANCE FORM

8/4/05

FACILITY: DCC - m44DATE: April 10, 2005GRIEVANT'S NAME: James RileySBI#: 00169216CASE#: 15782TIME OF INCIDENT: denied Medical TreatmentHOUSING UNIT: ~~Matu, Bldg-23~~

BRIEFLY STATE THE REASON FOR THIS GRIEVANCE. GIVE DATES AND NAMES OF OTHERS INVOLVED IN THE INCIDENT OR ANY WITNESSES.

I am being harmed by a strep skin infection due to the medical STAFF Failure to Test all new intake inmates. The skin infection is aggravated by the microbe contamination in the water. I am being denied medical treatment for the skin infection. In support see medical complaint attached hereto. I am filing a regular grievance because the medical department is not processing grievances in the prescribed time period to prevent deliberate indifference to an inmate's serious medical needs.

ACTION REQUESTED BY GRIEVANT: Comply with Federal Water Pollution Control Act. Test all new intake inmates for the skin infection describe in attached medical complaint. Order the medical department to treat my skin infection. This grievance is filed to place the institution on notice for potential court action regarding the complaints herein.

GRIEVANT'S SIGNATURE: James RileyDATE: April 10, 2005WAS AN INFORMAL RESOLUTION ACCEPTED? (YES) (NO)

(COMPLETE ONLY IF RESOLVED PRIOR TO HEARING)

GRIEVANT'S SIGNATURE: _____

DATE: _____

IF UNRESOLVED, YOU ARE ENTITLED TO A HEARING BY THE RESIDENT GRIEVANCE COMMITTEE.

cc: INSTITUTION FILE
GRIEVANT

RECEIVED

APR 11 2005

April '97 REV

Inmate Grievance Office

Ex. A-8

DELAWARE DEPARTMENT OF CORRECTIONS
REQUEST FOR MEDICAL/DENTAL SICK CALL SERVICES
FACILITY: DELAWARE CORRECTIONAL CENTER
This request is for (circle one): **MEDICAL DENTAL MENTAL HEALTH**

James Riley

Name (Print)

MHU, Bldg. 23

Housing Location

8/14/60

Date of Birth

169716

SBI Number

4/10/05

Date Submitted

Complaint (What type of problem are you having)?

Complaint ATTACHED

James Riley

Inmate Signature

April 10, 2006

Date

The below area is for medical use only. Please do not write any further.

S:

O: Temp: _____ Pulse: _____ Resp: _____ B/P: _____ WT: _____

A:

P:

E:

Provider Signature & Title

Date & Time

Re: This is to place the Commissioner, Warden And Medical on notice of my continuous Medical Complaints And lack of treatment for purpose of Future Civil Action for indifference to serious medical needs.

Medical Complaint:

This my third sick call slip for treatment for antibiotic resistant methicillin Staphylococcus Aureus Facial skin infection. This infection is compounded by the Strep bacteria in the water. The infection is causing permanent skin & tissue damage. The EPA has previously cited the department (DCC) in violation of the Federal Water Pollution Control Act. Also, medical should know of the recent Federal Center for Disease Control and Prevention warning for doctors to conduct routine test of all skin infections among prisoners to identify patients who need urgent treatment with one of the handful of drugs still accessible for killing this disfiguring and flesh eating germ skin infections. I am being denied adequate medical treatment. The common Hydrocortisone 1% & 0.5% antibiotic creams are not killing this infectious cancer-like germ which has already caused some permanent damage to my skin.

DCC medical staff Failure to test all new in-take inmates prior to placement in general population has resulted in my exposure and will cause an epidemic.

4/10/05


EXA-10

James Riley #16916
MHU Bldg. 23



STATE OF DELAWARE
DEPARTMENT OF CORRECTION
OFFICE OF THE DEPUTY WARDEN I
DELAWARE CORRECTIONAL CENTER
1181 Paddock Road
SMYRNA, DELAWARE 19977
Telephone: (302) 653-9261
Fax: (302) 659-6668

MEMORANDUM

TO: IM James Riley SBI# 169716 MHU 23 CU6T
FROM: David Pierce, Deputy Warden I 
DATE: April 21, 2005
RE: Medical

My office received your letter dated April 10, 2005; regarding your current medical situation and has forwarded it to Health Services Administrator Munson for her investigation and action.

DP/dc

Attachment

cc: Health Services Administrator Munson
File

Ex. A-11

APR 12 2005

APR 10, 2005

RECEIVED

APR 08 2005

DEPUTY WARDEN I

Dear Warden Carroll,

I am writing you regarding an extremely health threatening matter. There is a new skin infection affecting many people around the country. I may have been exposed to this infection. What makes the infection worse is the bacteria in the polluted water.

I have filed several sick call complaints but medical refuses to provide me with any kind of assistance or allow me to see the doctor who can adequately define what the infection is, and adequately treat the problem.

Enclosed herewith is a copy of my recent sick call complaint to give you a clearer understanding of what's going on.

This will also serve as notification to you of the medical department's deliberate indifference to my serious medical needs for purpose of holding you liable in any future court action. But I hope you can resolve this problem without going to court.

Thank you!
James Riley
#1169716
MHU, Bldg. 23

EX.A-12

**DELAWARE DEPARTMENT OF CORRECTIONS
REQUEST FOR MEDICAL/DENTAL SICK CALL SERVICES
FACILITY: DELAWARE CORRECTIONAL CENTER**

This request is for (circle one): MEDICAL DENTAL MENTAL HEALTH

James Riley

Name (Print)

MHU, Bldg. 23

Housing Location

8/14/60

Date of Birth

169716

SBI Number

4/10/05

Date Submitted

Complaint (What type of problem are you having)?

Complaint ATTACHED

James Riley

Inmate Signature

April 10, 2005

Date

The below area is for medical use only. Please do not write any further.

S:

O:

Temp: _____

Pulse: _____

Resp: _____

B/P: _____

WT: _____

A:

P:

E:

Provider Signature & Title

Date & Time

3/1/99 DE01

FORM#:

MED

263

Ex. A-13

Re: This is to place the Commissioner, Warden And Medical on notice of my continuous medical complaints And lack of treatment For purpose of Future Civil Action For indifference to serious medical needs.

Medical Complaint:

This my third sick call slip For treatment For Antibiotic resistant methicillin Staphylococcus aureus Facial skin infection. This infection is compounded by the Strep bacteria in the water. The infection is causing permanent skin & tissue damage. The EPA has previously cited the department (DCC) in violation of the Federal Water Pollution Control Act. Also, medical should know of the recent Federal Center For Disease Control and Prevention warning For doctors to conduct routine test of all skin infections among prisoners to identify patients who need urgent treatment with one of the handful of drugs still accessible For killing this disfiguring and flesh eating germ skin infections. I am being denied adequate medical treatment. The common Hydrocortisone 1% & 0.5% antibiotic creams are not killing this infectious cancer-like germ which has already caused some permanent damage to my skin.

DCC medical staff Failure to test all new in-take inmates prior to placement in general population has resulted in my exposure and will cause an epidemic.

4/10/05

James Riley #169716
- MHU, Bldg. 23

Ex. A-14